

.CLAIMS ONLY

Application Number: 12-123456

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend	
1							51
2							52
3							53
4							54
5							55
6							56
7							57
8							58
9							59
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41							91
42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
Total							Total
Indep							Indep
Total							Total
Depend							Depend
Total							Total
Claims							Claims